FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1		(See instruction			Office use only
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Financial Plan	ning Association	Political Action	Committee		
ADDRESS (number and	street) 1600	K St., NW			
X (Check if addr is changed)		201 nington		DC _	20006
			CITY	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	IL ADDRESS on@fpanet.org				1
	DA 05 ADDD500 (II				
COMMITTEE'S WEB	anet.org/member		na nac cfm		
COMMITTEE'S FAX N 202-449-6350	NUMBER	Ь			
2. DATE 0.1		2007			
3. FEC IDENTIFICA	ATION NUMBER	(	C C00370130		
4. IS THIS STATEM	IENT X NEW	'(N) OR	AMENDED (A)		
I certify that I have exami	ined this Statement and	to the best of my know	wledge and belief it is true, correct a	nd complete	_
Type or Print Name of	TreasurerN	/Ir. Duane Thom	pson		
Signature of Treasurer	. Electronically File	d by <b>Mr. Duane</b>	Thompson	Date 0 1	26 YYYYY 2007
NOTE: Submission of fa			subject the person signing this Stati	·	s of 2 U.S.C. S437g.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)

This committee is a principal campaign committee. (Complete the candidate information below.)    Candidate	Page 2	FEOForm 1 (Revised 02/2003)				
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)  Name of Candidate  Candidate  Candidate  Party Affiliation  Office Sought: House Senate President District  (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.  Name of Candidate  (d) This committee is a (National, State (or subordinate) committee of the Republican,etc.) Part  (e) X This committee is a separate segregated fund  (f) This committee is a separate segregated fund  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.  Mailing Address  CITY STATE X ZIP CODE A		. TYPE OF COMMITTEE (Check One)				
information below.)  Name of Candidate Party Affiliation  Candidate Party Affiliation  Candidate Party Affiliation  Candidate President  Candidate President  Candidate  (National, State (or subordinate) committee of the Candidate  Candidate	plete the candidate information below.)	(a) This committee is a principal campai				
Candidate  Candidate Party Affiliation  City	principal campaign committee. (Complete the candidate	(-)				
Party Affiliation Sought: House Senate President District  (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.  Name of Candidate  (d) This committee is a (National, State) (Openocratic, Republican, etc.) Part  (e) This committee is a separate segregated fund  (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.  3. Name of Any Connected Organization or Affiliated Committee  Mailing Address  CITY  STATE  ZIP CODE						
Name of Candidate  (d) This committee is a (National, State (or subordinate) committee of the Republican,etc.) Part  (e) X This committee is a separate segregated fund  (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.  3. Name of Any Connected Organization or Affiliated Committee  Mailing Address  CITY  STATE  ZIP CODE	Senate President					
Candidate  (d) This committee is a (or subordinate) committee of the Republican,etc.) Part  (e) X This committee is a separate segregated fund  (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.  3. Name of Any Connected Organization or Affiliated Committee  Mailing Address  CITY  STATE  ZIP CODE	is NOT an authorized committee.	(c) This committee supports/opposes onl				
(d) This committee is a						
Mailing Address  CITY STATE A ZIP CODE A	te) committee of the Republican,etc.) Party.	(e) X This committee is a separate segrega  (f) This committee supports/opposes mo				
CITY STATE A ZIP CODE A		. Name of Any Connected Organization or Affiliate				
CITY STATE A ZIP CODE A						
CITY STATE A ZIP CODE A						
CITY STATE ZIP CODE A		Mailing Address				
Relationship	STATE ▲ ZIP CODE ▲	CITY▲ STATE ★ ZIP CODE ▲				
		Relationship				
Type of Connected Organization:						
Corporation Corporation w/o Capital Stock Labor Organization	apital Stock Labor Organization	Corporation				
Membership Organization Trade Association Cooperative	Cooperative	Membership Organization				

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W	rite or Type Comm	ittee Name					
	Financial Pla	nning Associatior	Political Action Committe	ее			
7.		cords: Identify by Committee books a	name, address, (phone num and records.	nber optional), ar	d position of th	e person in	
	Full Name						
	Mailing Address						
	Title or Position	•	CITY A		STATE	ZIP COD	E 🛦
				Telephone nur	nber		
3.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).						
	Full Name of Treasurer Mr. Duane Thompson						
	Mailing Address		1600 K Street, NW				
			Suite 201				
			Washington		_DC	20006 –	
	Title or Position \	,	CITY A		STATE	ZIP COD	E 🛦
		Managing Directo	r, W	Telephone nur	<b>202</b>	449	6341
	Full Name of Designated Agent	Mary Bell					
	Mailing Address		1600 K Street, NW				
			Suite 201				
			Washington		_DC	20006 -	
	Title or Position \	,	CITY A		STATE A	ZIP CODE	<b>A</b>
		Assistant Directo	ro	Telephone nur	<b>202</b>	449	6344

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9.	safety deposit boxes of	nks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, tety deposit boxes or maintains funds.  me of Bank, Depository, etc.				
		United Bank				
	Mailing Address	1667 K Street, NW				
		Washington DC 200	006   -			
		CITY A STATE A ZI	P CODE △			